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SENDER WILL CHECK CLASSIFICATION TOP AND BOTTOM

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CENTRAL INTELLIGENCE AGENCY
OFFICIAL ROUTING SLIP

TO	NAME AND ADDRESS	INITIALS	DATE
1	Mr. Wisner		
2			
3			
4			
5			
6			
ACTION	DIRECT REPLY	PREPARE REPLY	
APPROVAL	DISPATCH	RECOMMENDATION	
COMMENT	FILE	RETURN	
CONCURRENCE	INFORMATION	SIGNATURE	

Remarks:

Frank: I would like to discuss with you
briefly, in person, the Vallimarescu testimony
as recounted to me by [] 25X1A9a

LRH

FOLD HERE TO RETURN TO SENDER

FROM: NAME, ADDRESS AND PHONE NO.	DATE
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General Counsel

5/10/56

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FORM NO. 237 Replaces FORM 304
1 APR 55 which may be used.

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